

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. 09783408		FILING DATE			
						APPLICANT(S)					
CLAIMS											
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*	*		
	IND.	DEP.	IND.	DEP.	IND.	DEP.				IND.	DEP.
1							51				
2		1					52				
3		1					53				
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47							97				
48							98				
49							99				
50							100				
TOTAL IND.	1										
TOTAL DEP.	2										
TOTAL CLAIMS	3										

PTO-1380 (3-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. DEPARTMENT OF COMMERCE

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